



Customer No.: 26308

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Shadduck

Docket No.: 9222.17800-DIV 2

Serial No.: 10/780,027

Examiner: A. Farah

Filed: 17 February 2004

Group Art Unit: 3739

Title: Surgical Instruments and Techniques for Treating Gastro-Esophageal Reflux Disease

AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

The Examiner's attention is directed to the Information Disclosure Statement that accompanies this Amendment.

This Amendment responds to the Office Action mailed January 4, 2005.

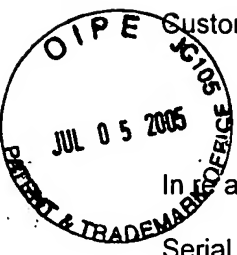
An automatic three month extension of time to respond, up to and including July 4, 2005, is respectfully requested. The requisite fee accompanies this Amendment.

Please amend the application as follows:

07/07/2005 BABRAHA1 00000032 10780027

01 FC:2253

510.00 0P



Customer No. 26308

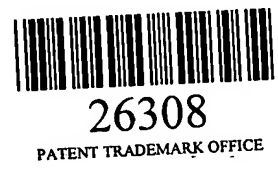
PATENT *[Signature]*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In application of: Shaddock
Serial No.: 10/780,027
Filed: 17 February 2004
For: Surgical Instruments and Techniques for Treating Gastro-Esophageal Reflux Disease

Docket No.: 9222.17800-DIV 2
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Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450



AMENDMENT TRANSMITTAL

- 1. Transmitted herewith is an amendment for this application.

STATUS

- 2. Applicant is
 - ☒ a small entity
 - ☐ other than a small entity.

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United State Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed as follows: Mail Stop Amendment, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Date: 1 July 2005

Linda S. Wenzel
Type or print name of person mailing paper
Linda S. Wenzel
(Signature of person mailing paper)

EXTENSION OF TERM

NOTE: "Extension of Time in Patent Cases (Supplement Amendments) - If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 CFR 1.645 for extensions of time in interference proceedings and 37 CFR 1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply
(complete (a) or (b) as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)(1) - (a)(5)) for the total number of months checked below:

	Extension (months)	Fee for other than <u>Small Entity</u>	Fee for <u>Small Entity</u>
<input type="checkbox"/>	one month	\$ 120.00	\$ 60.00
<input type="checkbox"/>	two months	\$ 450.00	\$ 225.00
<input checked="" type="checkbox"/>	three months	\$1020.00	\$ 510.00
<input type="checkbox"/>	four months	\$1590.00	\$ 795.00
<input type="checkbox"/>	five months	\$2160.00	\$1080.00

Fee: \$ 510.00

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request: \$ _____

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee (Small Entity)	Additional Fee (Large Entity)
Total Claims 37 CFR 1.16(i)*	18	-20 =	(2)	x \$ 25.00	\$0	\$0
Independent Claims (37 CFR 1.16(h)**	2	-3 =	(1)	x \$ 100.00	\$0	\$0
First Presentation of Multiple Dependent claim(s) if any (37 CFR 1.16(j))				\$180.00	\$0	\$0
Total Additional Fee					\$0	\$0

* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING: "After final rejection or action (S 1.113) amendments may be made cancelling claims or complying with any requirement of form which has been made." 37 CFR S 1.116(a) (emphasis added).

(complete (c) or (d) as applicable)

(c) ☒ No additional fee for claims is required.

OR

(d) ☐ Total additional fee for claims required \$_____.

FEE PAYMENT

5. ☒ Attached is a check in the sum of \$ 690.00 (includes IDS).

☐ Charge Account No. _____ the sum of \$_____.

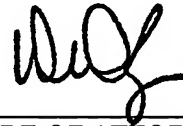
FEE DEFICIENCY

NOTE: *If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).*

6. [x] If any overpayment of fees or additional extension and/or fee is required, charge Account No. 06-2360.

AND/OR

- [x] If any overpayment of fees or additional fee for claims is required charge Account No. 06-2360



SIGNATURE OF ATTORNEY

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TYPE OR PRINT NAME OF ATTORNEY

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